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through leadership,
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January 28, 2008

TO: Each Supervisor

FROM: Bruce A. Chernof, M.D.
Director and Chief Medical Officer

SUBJECT: **GRADUATE MEDICAL EDUCATION QUARTERLY
REPORT FOURTH CALENDAR QUARTER (OCT - DEC) 2007**

The Graduate Medical Education (GME) Quarterly Report for the fourth calendar quarter of 2007 is attached. Information contained in this report is compiled and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored residency training programs as follows:

I. Training Program Accreditation Status and Housestaff Totals (Attachment I)

<u>Total Housestaff:</u>	<u>1,479</u> (Academic Year 2007-2008)
LAC+USC	903
Harbor-UCLA	488
Olive View	88

On October 10, 2007, the ACGME notified Dr. Lawrence Opas, the Designated Institutional Official (DIO) for Graduate Medical Education at LAC+USC, of its intention to immediately restore full accreditation to the Obstetrics and Gynecology program which was previously on probation. The program was accredited for three (3) years. The Department recognizes this as an achievement since programs with probationary status that achieve full accreditation are customarily granted one (1) or two (2) year accreditation cycles.

II. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

Medical specialty/subspecialty board certification results for 1,506 housestaff who completed County training programs from 2005 through 2007 are presented in this report. A final 2004 update for four-hundred-twenty-two (422) housestaff is also included. The next verification of board certification status will occur in March, 2008, and will update results for 2005 through 2007. Drew University voluntarily withdrew from its role as primary institutional sponsor at Martin Luther King-Harbor (MLK-H) Hospital effective July 1, 2007, however, certification reporting for MLK-H will continue until the 2007 candidates are deleted from the three-year running totals.

III. Facility Compliance with Resident Supervision Guidelines (Attachment III)

Third Quarter (January - March) of Fiscal Year 2006-07

System-wide audit results for fourteen (14) of seventeen (17) resident supervision indicators met or exceeded the eighty percent (80%) compliance threshold however, opportunities for improvement continue to exist. Aggregate totals for three (3) indicators failed to meet the compliance threshold. Corrective

Each Supervisor
January 28, 2007
Page 2

action plans, addressing noncompliance, are required to be submitted to the facility governing body for review. Facilities demonstrating the best performance and/or a greater than fifteen percent (15%) improvement receive annual cash awards for the purchase of equipment for patient care.

If you have any questions or need additional information, please let me know.

BAC:pd
506:015

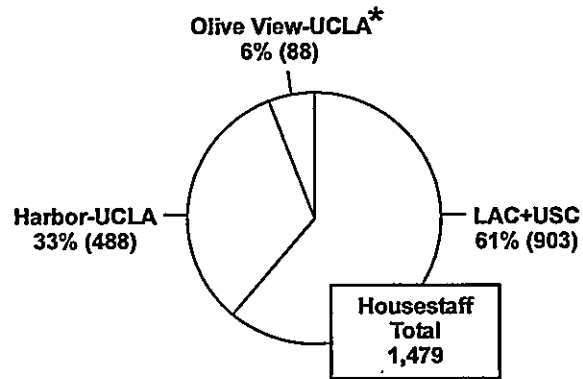
Attachments

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors

Los Angeles County Graduate Medical Education Programs, Accreditation Status and Housestaff Totals 2007-2008

○ LAC+USC Medical Center

Program	Status
Institution	Favorable
Allergy & Immunology	Continued Full Accreditation
Anesthesiology	Continued Full Accreditation
Anes: Pain Management	Accredited USC Integrated
Colon & Rectal Surgery	Full Accreditation
Dentistry	Full Accreditation ADA USC Integrated
Oral Maxillofacial Surgery	Accredited ADA USC Integrated
Dermatology	Full Accreditation
Emergency Medicine	Continued Full Accreditation
Family Medicine	Continued Full Accreditation USC Integrated
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology	Continued Accreditation
Int Med: Electrophysiology	Initial Accreditation USC Integrated
Int Med: Card-Intervent	Accredited USC Integrated
Int Med: Endocrinology	Continued Accreditation
Int Med: Gastroenterology	Continued Accreditation
Int Med: Geriatrics	Continued Accreditation
Int Med: Hematology	Continued Accreditation
Int Med: Infectious Disease	Continued Accreditation
Int Med: Nephrology	Continued Accreditation
Int Med: Oncology	Continued Accreditation
Int Med: Pulmonary Crit Care	Continued Accreditation
Int Med: Rheumatology	Continued Full Accreditation
Neurological Surgery	Full Accreditation
Neurology	Continued Full Accreditation
Clinical Neurophysiology	Accredited
Nuclear Medicine	Full Accreditation
Obstetrics & Gynecology	Full Accreditation
Ophthalmology	Continued Full Accreditation
Orthopaedic Surgery	Continued Full Accreditation
Ortho Surg: Hand	Accredited
Otolaryngology	Continued Full Accreditation
Pathology	Continued Full Accreditation
Cytopathology	Continued Accreditation
Hematopathology	Continued Accreditation
Neuropathology	Continued Accreditation
Selective Pathology	Initial Accreditation
Pediatrics	Continued Full Accreditation
Peds: Infectious Disease	Accredited
Peds: Medicine	Accredited
Peds: Neonatology	Continued Accreditation
Plastic Surgery	Full Accreditation
Plastic Surgery Hand	Full Accreditation
Psychiatry	Continued Full Accreditation
Psych: Child/Adolesc	Continued Accreditation
Psych: Forensic	Continued Accreditation
Radiation Oncology	Continued Full Accreditation
Radiology	Continued Full Accreditation
Rad: Neuro	Accredited USC Integrated
Rad: Vasc/Interv	Accredited USC Integrated
Surgery	Continued Full Accreditation
Surgical Critical Care	Full Accreditation
Vascular Surgery	Accredited USC Integrated
Thoracic Surgery	Full Accreditation
Urology	Full Accreditation



○ Harbor-UCLA Medical Center

Program	Status
Institution	Favorable
Anesthesiology	Continued Full Accreditation
Emergency Medicine	Continued Full Accreditation
Emerg: Ultrasound	Accredited CASE
Family Medicine	Continued Full Accreditation
Family Med: Sports Med	Accredited
General Dentistry	Accredited ADA
Oral Maxillofacial Surgery	Accredited ADA
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology	Continued Accreditation
Int Med: Electrophysiology	Continued Accreditation
Int Med: Card-Intervent	Accredited
Int Med: Dermatology	Provisional Accreditation
Int Med: Endocrinology	Continued Accreditation
Int Med: Hematology	Continued Accreditation
Int Med: Infectious Disease	Continued Accreditation
Int Med: Oncology	Continued Accreditation
Int Med: Nephrology	Continued Accreditation
Int Med: Pulmonary Crit Care	Accredited
Neurology	Continued Full Accreditation
Neuro: Child	Continued Accreditation w/Warning
Neuro: EEG	Accredited AEEGS
Obstetrics & Gynecology	Continued Full Accreditation
Maternal/Fetal	Accredited CREOG
Female Pelvic & Repro Surg	Accredited CREOG
Orthopaedic Surgery	Continued Full Accreditation
Ortho Foot & Ankle	Accredited
Pathology	Continued Full Accreditation
Pediatrics	Continued Full Accreditation
Peds: Critical Care	Continued Accreditation
Peds: Emergency Med	Continued Accreditation
Peds: Endocrinology	Continued Accreditation
Peds: Infectious Disease	Continued Accreditation
Peds: Neonatology	Continued Accreditation w/Warning
Psychiatry	Continued Full Accreditation
Psych: Child/Adolesc	Continued Full Accreditation
Radiology	Continued Full Accreditation
Rad: Body Imaging	Accredited ACR
Rad: Breast/Surgery	Accredited ACR
Rad: Neuro	Continued Accreditation
Rad: Nuclear	Accredited
Rad: Vasc/Interv	Continued Accreditation
Surgery	Full Accreditation
Surg: Vascular	Continued Accreditation

○ Olive View-UCLA Medical Center

Program	Status
Institution	Not Required
Internal Medicine	Continued Full Accreditation
Int Med & Emergency Med	Continued Full Accreditation
Int Med: Hematology	Continued Full Accreditation
Int Med: Nephrology	Continued Full Accreditation
Int Med: Oncology	Continued Full Accreditation
Int Med: Rheumatology	Continued Accreditation

* UCLA employed housestaff = 88 (County-sponsored, UCLA-employed)

Accredited by the American College of Radiology (ACR)
 Accredited by the American Dental Association (ADA)
 Accredited by the American Electroencephalogram Society (AEEGS)
 Accredited by the Consortium for the Accreditation of Sonographic Education (CASE)
 Accredited by the Council on Resident Education in OB&GYN (CREOG)
 All others:
 Accredited by the Accreditation Council for Graduate Medical Education (ACGME).

Glossary of Program Accreditation Status

Accredited

Subspecialties only - A Review Committee confers the status of "Accredited" when the dependent subspecialty program has demonstrated substantial compliance with program requirements

Accreditation with Warning

Subspecialties only - A Review Committee may grant "Accreditation with Warning" when the dependent subspecialty has been found to have one or more area of non-compliance with program requirements that are of sufficient substance to require prompt correction.

Continued Full Accreditation

"Continued Full Accreditation" status is conferred when a Review Committee determines that a program continues to demonstrate substantial compliance with program requirements

Favorable

"Favorable" status is conferred when a Review Committee determines that the institution is in substantial compliance with the essential components of Graduate Medical Education

Full Accreditation

A Review Committee grants "Full Accreditation" when a program holding provisional accreditation or probationary accreditation demonstrates substantial improvement and/or compliance with program requirements

Initial Accreditation

"Initial Accreditation" is conferred when a Review Committee determines that a proposal for a new program substantially complies with all program requirements

Probationary Accreditation

"Probationary Accreditation" is conferred when the Review Committee determines that a program has failed to demonstrate substantial compliance with program requirements

Provisional Accreditation

New programs go through a period of "Provisional Accreditation" which implies that a program is in the developmental stage. Provisional Accreditation can be conferred when a program's accreditation was withdrawn and the program has applied to become newly accredited.

Medical Specialty/Subspecialty Board Certification for Los Angeles County Department of Health Services Residents and Fellows

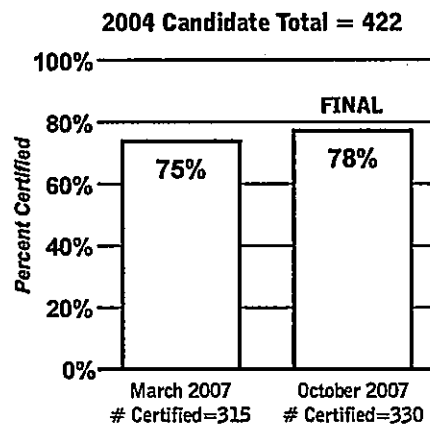
The Office of Clinical Affairs and Affiliations (OCAA) verifies the medical specialty board certification status of County-trained physicians with the American Board of Medical Specialties (ABMS) for the provision of updated results presented to your Board bi-annually.

Reporting Medical Specialty Board Certification

Fifteen of the 24 ABMS medical specialty member boards require two examinations, the written qualifying exam and the oral certifying exam. Nine medical specialty boards require one written certifying exam. Only eight of the 24 boards impose time limitations for initial testing upon completion of residency training. The majority of physician candidates have unlimited time to apply. Data in this report are the results of the certifying examination presented by facility, in three-year running totals. At the end of each academic year, new physician candidates are added while the earliest candidates are re-verified for a final result then deleted from the three-year total.

The final verification of 2004 physician candidates, illustrated below, shows a 4.79% increase in certification achievement since the prior March, 2007 verification:

2004 Medical Specialty/Subspecialty Board Certification Achievement Final Results as of October 2007



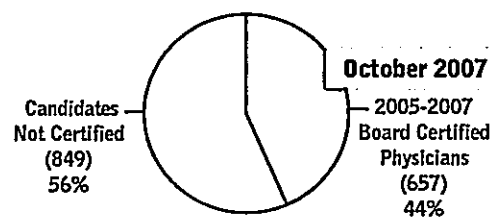
2005 - 2007 Board Certification Results as of October 2007

As of October 2007, board certification verification was completed for an aggregate total of 1,506 housestaff who completed County training programs in years 2005 through 2007. Forty-four percent of the total have achieved board certification. The following pages provide facility-specific certification results.

Candidates completing residency/fellowship training from 2005 through 2007

Candidate Total = 1,506

LAC+USC Medical Center — 805
Harbor-UCLA Medical Center — 400
MLK-Harbor Medical Center — 216
Olive View-UCLA Medical Center — 85



NOTE:

The majority of candidates who recently completed training in June, 2007, have not tested. Many specialty boards will open examinations in the latter months of 2007 and the early months of 2008. In some cases, testing has occurred but the results have not yet posted.

**Medical Specialty/Subspecialty Board Certification
Los Angeles County DHS Trained Residents and Fellows
2005-2007**

Attachment II
page 2

Certification Types- General (G), Subspecialty (S)

No Candidates

☐ LAC+USC Medical Center

PROGRAM	2005			2006			2007			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Allergy & Immunology (G)	2	2	100%				2	0	0%	No Limit
Anesthesiology (G)	15	12	80%	14	8	57%	17	0	0%	12 Years
Pain Management (S)	1	1	100%				1	0	0%	
Colon & Rectal Surgery (G)	3	2	67%	3	0	0%	3	0	0%	5 Years
Dermatology (G)	2	2	100%	3	2	67%	3	3	100%	No Limit
Emergency Medicine (G)	18	17	94%	17	11	65%	18	0	0%	No Limit
Internal Medicine (G)	54	47	87%	57	40	70%	54	2	4%	No Limit
Cardiovascular Disease (S)	4	4	100%	4	3	75%	3	0	0%	
Endocrinology (S)	3	3	100%	2	2	100%	3	0	0%	
Gastroenterology (S)	5	5	100%	3	3	100%	5	0	0%	
Geriatric Medicine (S)	2	2	100%	1	1	100%	1	0	0%	
Hematology & Med Onc (S)	3	3	100%	4	4	100%	4	0	0%	
Infectious Disease (S)	2	2	100%	2	2	100%	2	1	50%	
Nephrology (S)	4	4	100%	4	3	75%	4	0	0%	
Pulmonary & Critical Care (S)	4	3	75%	6	5	83%	6	6	100%	
Rheumatology (S)	3	2	67%	3	1	33%	3	0	0%	
Nuclear Medicine (G)	1	0	0%	1	0	0%	1	0	0%	No Limit
Neurology (G)	5	3	60%	1	0	0%	6	0	0%	No Limit
Neurophysiology (S)				2	0	0%	2	0	0%	
Neurological Surgery (G)	2	0	0%	2	0	0%	2	0	0%	5 Years
1 Obstetrics & Gynecology (G)	12	1	8%	10	0	0%	12	0	0%	No Limit
Female Pelvic Medicine (S)	1	0	0%	1	0	0%	1	0	0%	
Gynecologic Oncology (S)				2	0	0%	2	0	0%	
Maternal-Fetal Medicine (S)				1	0	0%	2	0	0%	
Repro Endocrin & Infertility (S)	1	1	100%	1	0	0%	1	0	0%	
Ophthalmology (G)	6	4	67%	6	0	0%	6	1	17%	No Limit
2 Orthopedic Surgery (G)	10	0	0%	10	0	0%	10	0	0%	No Limit
Ortho Hand Surgery (S)	1	1	100%	1	0	0%	2	0	0%	
Otolaryngology (G)	4	3	75%	4	0	0%	3	0	0%	No Limit
Pathology (G)	6	6	100%	12	8	67%	7	1	14%	5 Years
Cytopathology (S)	4	4	100%	4	4	100%	4	0	0%	
Hematopathology (S)	2	0	0%	2	1	50%	1	0	0%	
Neuropathology (S)	1	1	100%							
3 Surgical Pathology	7	7	100%	7	5	71%	6	0	0%	
Pediatrics (G)	14	12	86%	15	11	73%	14	4	29%	No Limit
Peds/Internal Med (G)	5	4	80%	2	0	0%	5	0	0%	
Neonatal-Perinatal (S)	2	1	50%	2	0	0%	4	0	0%	
Plastic Surgery (G)	2	1	50%	4	0	0%	3	1	33%	2 Years
Psychiatry (G)	9	0	0%	16	2	13%	13	0	0%	No Limit
Child/Adolescent Psychiatry (S)	8	2	25%				6	0	0%	
Forensic Psychiatry (S)	3	1	33%	4	0	0%	2	0	0%	
Radiology (G)	9	9	100%	12	12	100%	10	7	70%	No Limit
Intervent Radiology (S)				4	0	0%	3	0	0%	
Neuroradiology (S)	1	0	0%	5	0	0%	5	0	0%	
Radiation Oncology (G)	1	1	100%	1	1	100%	1	0	0%	No Limit
Surgery (G)	8	7	87%	6	5	83%	6	0	0%	3 Years
Surgical Critical Care (S)	2	2	100%	3	3	100%	3	0	0%	
Vascular Surgery (G)	1	1	100%	1	0	0%	1	0	0%	No Limit
Thoracic Surgery (G)	1	1	100%	2	0	0%	2	2	100%	5 Years
4 Urology (G)	3	0	0%	3	0	0%	3	0	0%	5 Years
TOTALS	257	184	72%	270	137	51%	278	28	10%	

**Medical Specialty/Subspecialty Board Certification
Los Angeles County DHS Trained Residents and Fellows
2005-2007**

Attachment II
page 3

Certification Types- General (G), Subspecialty (S)
No Candidates

☐ Harbor-UCLA Medical Center

PROGRAM	2005			2006			2007			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Anesthesiology (G)	5	3	60%	4	0	0%	5	0	0%	12 Years
Dermatology (G)				1	1	100%	2	2	100%	No Limit
Emergency Medicine (G)	13	12	92%	12	4	33%	12	0	0%	No Limit
Sports Medicine (S)							1	0	0%	
Family Medicine (G)	12	12	100%	11	9	82%	13	0	0%	No Limit
Sports Medicine (S)	2	0	0%	2	2	100%	3	0	0%	
Internal Medicine (G)	18	18	100%	24	18	75%	22	3	14%	No Limit
Cardiology (S)	7	6	86%	5	5	100%	4	0	0%	
Cards-Electrophysiology (S)				2	2	100%	2	0	0%	
Intervent Cardiology (S)	1	1	100%	3	1	33%	3	2	66%	
Endocrinology (S)	2	2	100%	4	4	100%	7	2	29%	
Gastroenterology (S)	1	1	100%							
Infectious Disease (S)	2	2	100%	2	2	100%	2	0	0%	
Nephrology (S)				4	4	100%	1	0	0%	
Oncology/Hematology (S)	3	3	100%	3	2	67%	4	0	0%	
Pulmonary Disease (S)	2	2	100%	2	2	100%	3	3	100%	
Rheumatology (S)	1	1	100%							
Medical Genetics (G)	1	1	100%							No Limit
Neurology (G)	2	0	0%	2	0	0%	3	0	0%	No Limit
1 Neurophysiology (S)	2	0	0%	2	0	0%	1	0	0%	
Obstetrics & Gynecology (G)	5	0	0%	4	0	0%	7	0	0%	No Limit
Gynecologic Urology (S)				1	0	0%	1	0	0%	
2 Maternal-Fetal Medicine (S)	1	0	0%	1	0	0%	2	0	0%	
Orthopedic Surgery (G)	3	0	0%	3	1	33%	3	0	0%	No Limit
Foot and Ankle (S)	1	0	0%	1	0	0%	1	0	0%	
3 Pathology (G)	2	1	50%	2	1	50%	2	0	0%	5 Years
Surgical Pathology	2	1	50%	3	2	33%	2	1	50%	
Pediatrics (G)	10	10	100%	9	5	56%	11	1	9%	No Limit
Emergency Peds (S)	2	0	0%	1	0	0%	2	0	0%	
Peds Genetics (S)				1	1	100%				
Peds Infectious Disease (S)				1	0	0%				
Neonatology (S)	2	0	0%	1	0	0%	2	0	0%	
Peds Critical Care (S)	2	2	100%	2	2	100%	2	0	0%	
Psychiatry (G)	6	5	83%	6	0	0%	6	0	0%	No Limit
Child/Adolescent Psychiatry (S)	2	0	0%	3	0	0%	4	0	0%	
Radiology (G)	5	5	100%	5	5	100%	5	4	80%	No Limit
Interventional Radiology (S)				1	0	0%				
Neuroradiology (S)	1	0	0%	1	1	100%	1	1	100%	
Surgery (G)	4	3	75%	5	5	100%	5	1	20%	3 Years
Vascular Surgery (G)				1	1	100%	1	0	0%	No Limit
TOTALS	120	91	76%	135	80	59%	145	20	14%	

**Medical Specialty/Subspecialty Board Certification
Los Angeles County DHS Trained Residents and Fellows
2005-2007**

Attachment II
page 4

Certification Types- General (G), Subspecialty (S)
No Candidates

☐ **MLK-Harbor Medical Center**

PROGRAM	2005			2006			2007			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Anesthesiology (G)	6	3	50%	3	0	0%	3	0	0%	12 Years
Dermatology (G)	2	2	100%	2	2	100%	2	2	100%	No Limit
Emergency Medicine (G)	12	9	75%	11	1	9%	11	0	0%	No Limit
Family Medicine (G)	7	7	100%	7	7	100%	7	0	0%	No Limit
Internal Medicine (G)	13	13	100%	11	9	82%	20	0	0%	No Limit
Endocrinology (S)	3	3	100%	3	3	100%	2	0	0%	
Gastroenterology (S)	2	2	100%				1	0	0%	
Geriatric Medicine (S)	5	1	20%	3	0	0%	5	0	0%	
Infectious Disease (S)	1	1	100%	1	1	100%	1	0	0%	
1 Obstetrics & Gynecology (G)	4	0	0%	1	0	0%	2	0	0%	No Limit
Ophthalmology (G)	1	1	100%	2	0	0%	2	0	0%	No Limit
2 Orthopedic Surgery (G)	4	0	0%							No Limit
Otolaryngology (G)	2	2	100%	1	1	100%	1	0	0%	No Limit
Pediatrics (G)	14	6	43%	13	2	15%	11	0	0%	No Limit
Psychiatry (G)	4	1	25%	7	0	0%	3	0	0%	No Limit
TOTALS	80	51	64%	65	26	40%	71	2	3%	

☐ **Olive View-UCLA Medical Center**

PROGRAM	2005			2006			2007			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Internal Medicine (G)	19	17	89%	13	12	92%	33	0	0%	No Limit
Hematology & Med Onc (S)	1	1	100%	2	0	0%	4	0	0%	
Int Med & Emer Med (S)	1	1	100%				2	0	0%	
Nephrology (S)	2	2	100%	3	3	100%	2	0	0%	
Rheumatology (S)	1	1	100%	1	1	100%	1	0	0%	
TOTALS	24	22	92%	19	16	84%	42	0	0%	

- Obstetrics and Gynecology** candidates, after passing the qualifying written exam, must provide unsupervised patient care for at least 12 months prior to admission to the certifying oral exam. Certification results reflect little or no change due to the additional time requirement
- Orthopedic Surgery** candidates must first qualify by passing the written exam. There are two certifying exams. The candidate must pass the oral exam prior to admission to the clinical on-site exam. There are little or no changes in the verification results due to a 22-month in-practice requirement
- Surgical Pathology** is not yet an ACGME-recognized fellowship nor is it an American Board of Pathology subspecialty. Surgical Pathology programs, sanctioned by the ACGME began under the auspices of Selective Pathology. In order to practice Surgical Pathology, the fellow must pass the Anatomic Pathology portion of the primary certifying exam.
- Urology** candidates have two qualifying requirements. After passing the written exam, candidates must engage in a minimum of 18 months of urological patient care before qualifying to sit for the certifying oral exam. Certification results reflect little or no change due to the additional time requirement

**Los Angeles County Department of Health Services
Audit of Compliance with Resident Supervision Guidelines
DHS Policy Number 310.2**

**Fiscal Year 2006-2007
January - March, 2007**

In the third quarter of fiscal year 2006-07, nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) audited each teaching facility abstracting compliance information for seventeen inpatient indicators. The indicators, based on resident supervision guidelines, included eight surgical indicators, three ward/discharge indicators, three ICU indicators and three invasive procedure indicators.

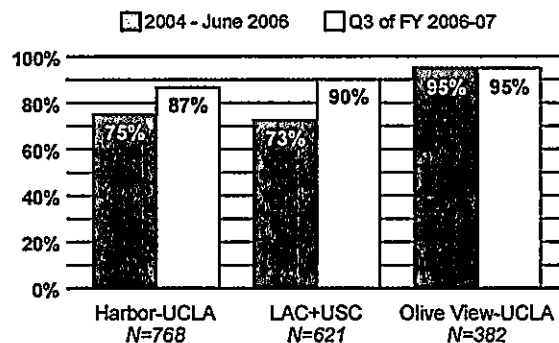
Data was collected from a sampling of hospital discharges with focus on the following services:

FACILITY	SERVICES
Harbor-UCLA	Trauma Surgery Plastic Surgery Vascular Surgery Urology
LAC+USC	Trauma Surgery Vascular Surgery Urology
Olive View-UCLA	Obstetrics Pediatrics

Findings

System aggregates demonstrated significant improvements: 16% at Harbor-UCLA and 23.3% at LAC+USC. Olive View-UCLA maintained a compliance rate of 95%. Each facility aggregate exceeded the 80% compliance threshold for this quarter as follows:

**System Aggregates: Seventeen Inpatient Indicators
2004 - June 2006 compared with Q3 of FY 2006-07**



NOTE:

Sample sizes are based on the projected number of annual discharges per service

Findings (continued)

System-wide audit results for fourteen of the seventeen resident supervision indicators met or exceeded the 80% compliance threshold however, opportunities for improvement continue to exist. The 80% threshold was not met for two ward indicators and one operative procedure indicator at Harbor-UCLA and LAC+USC as follows:

System-wide Non-compliance with 80% Compliance Threshold

INDICATOR	Harbor	LAC+USC	Olive View
WARD- ADMIT Admissions note was signed and/ or co-signed by the Attending within 24 hours of admission	74%		
WARD - DAILY Daily progress note indicates it was signed, co-signed or dis- cussed with Attending Q48 hours		71%	
OPERATIVE PROCEDURES If Attending was not present, the medical record reflects that the Supervisory Resident discussed the case with the Attending who authorized the procedure	75%	78%	

Conclusion

Each service failing to meet the 80% compliance threshold submits, to its facility governing body, corrective action plans addressing each deficiency. The "Best Practices" of services that achieve the highest compliance continue to be shared with those who fail to meet the threshold.

Facilities demonstrating the best performance and/or a greater than 15% improvement receive cash awards annually. These awards are released to the facility Quality Patient Care Fund or its equivalent to be used as described in the Committee of Interns and Residents' Memorandum of Understanding (if applicable) for the purchase of equipment for patient care.

Next Report

The next report will present resident supervision audit results for the fourth quarter (April through June 2007) of fiscal year 2006-07.